

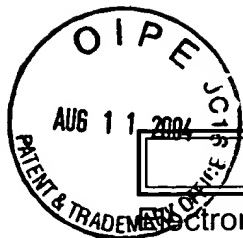


Electronic Filing System (EFS) Data
Electronic Patent Application Submission
USPTO Use Only

EFS ID: 66365
Application ID: 09742507 
Title of Invention: User-friendly electronic program
guide based on subscriber
characterizations
First Named Inventor: Komlika Gill
Domestic/Foreign Application: Domestic Application
Filing Date: 2000-12-21
Effective Receipt Date: 2004-08-11
Submission Type: Information Disclosure
Statement
Filing Type:
Confirmation number: 8422
Attorney Docket Number: T732-10


Total Fees Authorized: 180.0
Payment Category: Deposit Account
Deposit Account Number: 501535
Deposit Account Name: Patti Hespell
Access Code: ****
RAM Payment Status: RAM success
RAM User ID: EFSPROD
RAM Accounting Date: 2004-08-11
RAM Sequence Number: 30

Digital Certificate Holder: cn=Douglas Ryder,ou=Registered Attorneys,ou=Patent and Trademark
Office,ou=Department of Commerce,o=U.S. Government,c=US
Certificate Message Digest: a0b68f3fafb56f80c83542eedc18426021c6caf5



TRANSMITTAL

Electronic Version v1.1
Stylesheet Version v1.1.0

Title of Invention	User-friendly electronic program guide based on subscriber characterizations															
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<table border="1"><thead><tr><th>Submitted by:</th><th>Elec. Sign.</th><th>Sign. Capacity</th></tr></thead><tbody><tr><td>Douglas J Ryder Registered Number: 43,073</td><td>/djr/</td><td>Attorney</td></tr></tbody></table>			Submitted by:	Elec. Sign.	Sign. Capacity	Douglas J Ryder Registered Number: 43,073	/djr/	Attorney								
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Comments

Comments added at the request of EBC to avoid error messages

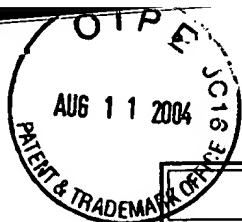


FEE TRANSMITTAL

Electronic Version v08

Stylesheet Version v08.0

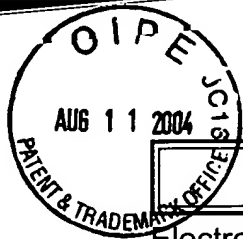
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<h3>TOTAL FEE AUTHORIZED \$180</h3> <p>Patent fees are subject to annual revisions on or about October 1st of each year.</p>									
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<h3>AUTHORIZED BILLING INFORMATION</h3> <p>The commissioner is hereby authorized to charge indicated fees and credit any overpayments to:</p> <p>Deposit account number: 501535</p> <p>Access Code: ****</p> <p>Deposit name: Expanse Networks Inc.</p> <p>Deposit authorized name: Patti Hespell</p> <p>Signature: /plh/</p> <p>Date (YYYYMMDD): 2004-08-11</p> <p>Charge Any Additional Fee Required Under 37 C.F.R. Sections 1.16 and 1.17.</p>									

**FEE TRANSMITTAL**

Electronic Version v08

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ELECTRONIC INFORMATION DISCLOSURE STATEMENT

Electronic Version v18

Stylesheet Version v18.0

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